

1   **Advancements in DNA vaccine vectors, non-mechanical delivery methods, and molecular  
2   adjuvants to increase immunogenicity**

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13   **Running Title:** Molecular Improvements to DNA Vaccine Immunogenicity

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15   Key Words: DNA Vaccine; immunogenicity; molecular adjuvant; plasmid; vaccine delivery  
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21    **Abstract**

22    A major advantage of DNA vaccination is the ability to induce both humoral and cellular  
23    immune responses. DNA vaccines are currently used in veterinary medicine, but have not  
24    achieved widespread acceptance for use in humans due to their low immunogenicity in early  
25    clinical studies. However, recent clinical data have re-established the value of DNA vaccines,  
26    particularly in priming high-level antigen-specific antibody responses. Several approaches have  
27    been investigated for improving DNA vaccine efficacy, including advancements in DNA vaccine  
28    vector design, the inclusion of genetically engineered cytokine adjuvants, and novel non-  
29    mechanical delivery methods. These strategies have shown promise, resulting in augmented  
30    adaptive immune responses in not only mice, but also in large animal models. Here, we review  
31    advancements in each of these areas that show promise for increasing the immunogenicity of  
32    DNA vaccines.

33 **Introduction**

34 The constant emergence, and re-emergence, of known and novel pathogens challenges  
35 researchers to develop new vaccination technologies that allow for the rapid development of safe  
36 and effective vaccines. Nucleic acid (DNA and RNA) vaccines have characteristics that meet  
37 these challenges, including ease of production, scalability, consistency between lots, storage, and  
38 safety. DNA vaccine technology usually is based on bacterial plasmids that encode the  
39 polypeptide sequence of candidate antigens. The encoded antigen is expressed under a strong  
40 eukaryotic promoter, yielding high levels of transgene expression.<sup>[1]</sup> Inclusion of transcriptional  
41 enhancers, such as Intron A, enhance the rate of polyadenylation and nuclear transport of  
42 messenger RNA (mRNA).<sup>[2]</sup> The vaccine plasmids are generally produced in bacterial culture,  
43 purified, and then used to inoculate the host.

44 Modern DNA vaccine design generally relies on synthesis of the nucleic acid and possibly one-  
45 step cloning into the plasmid vector, reducing both the cost and the time to manufacture. Plasmid  
46 DNA is also extremely stable at room temperature, reducing the need for a cold chain during  
47 transportation. Vaccination with DNA plasmid removes the necessity for protein purification  
48 from infectious pathogens, improving safety. Furthermore, DNA vaccination has an excellent  
49 safety profile in the clinic, with the most common side effect being mild inflammation at the  
50 injection site.<sup>[3]</sup> Importantly, DNA vaccines provide a safe, non-live vaccine approach to  
51 inducing balanced immune responses, as the *in vivo* production of antigen allows for presentation  
52 on both class I and class II major histocompatibility complex (MHC) molecules (**Figure 1**). This  
53 elicits antigen specific antibodies <sup>[4]</sup>, as well as cytotoxic T lymphocyte responses (CTL) <sup>[5]</sup>,  
54 something that remains elusive in most non-live vaccines. DNA vaccines have also demonstrated

55 the ability to generate follicular T helper populations<sup>[6]</sup>, which are critical for the induction of  
56 high quality antigen-specific B cell responses.<sup>[7]</sup>

57 DNA vaccination has proven successful in several animal models for preventing or treating  
58 infectious diseases, allergies, cancer, and autoimmunity.<sup>[8-12]</sup> The early success of small animal  
59 studies led to several human clinical trials. However, the protective immunity observed in small  
60 animals and non-human primates was not observed in human studies when DNA vaccines were  
61 administered alone by needle delivery. Like the more conventional protein-based vaccines, DNA  
62 can be delivered by a variety of routes, including intramuscular (IM), intradermal (ID), mucosal,  
63 or transdermal delivery. Because DNA plasmids must enter host cell nuclei in order to be  
64 transcribed into mRNA, the early failure of DNA vaccines to elicit strong responses in humans  
65 was largely due to their delivery by needle injection, which deposits the DNA in intracellular  
66 spaces, rather than within cells. Improved delivery technologies, such as intramuscular or  
67 intradermal electroporation, have been used to facilitate transport of DNA into cells, resulting in  
68 much better immunogenicity in both clinical and non-clinical studies.<sup>[13-19]</sup> In one study,  
69 electroporation-enhanced DNA vaccination resulted in increased polyfunctional antigen-specific  
70 CD8<sup>+</sup> T cells in patients receiving a HPV DNA vaccine expressing the E6 and E7 genes of  
71 HPV16 and HPV18 respectively.<sup>[20]</sup> The majority of DNA vaccinated patients displayed  
72 complete regression of their cervical lesions, as well as viral clearance, following DNA delivery.  
73 Other mechanical delivery approaches use physical force such as particle bombardment (gene  
74 gun) to deliver the DNA plasmids into targeted tissues or cells, with some clinical successes.<sup>[21-</sup>  
75 <sup>23]</sup> Delivery of a Hepatitis B DNA vaccine by particle bombardment resulted in sustained  
76 antibody titers in subjects who had previously failed to respond to a licensed subunit vaccine.<sup>[23]</sup>  
77 Needle-free pneumatic or jet injectors have also shown promise in both animal and human

78 clinical trials [24-27], and function by injecting a high-pressure, narrow stream of injection liquid  
79 into the epidermis or muscles of test subjects. In addition to these improved mechanical delivery  
80 methods, several other approaches are being explored to increase the immunogenicity of DNA  
81 vaccines in humans. Here we review three of these approaches which show promise for  
82 advancing DNA vaccines: non-mechanical delivery, inclusion of molecular adjuvants, and  
83 improvements in DNA vaccine vectors.

84 **Non-Mechanical DNA Vaccine Delivery**

85 As already mentioned, the greatest impediment to DNA vaccination is low immunogenicity due  
86 to difficulties in delivering DNA plasmid into the host cell. The transportation of DNA vaccine  
87 plasmids into cellular nuclei requires the crossing of several barriers. Vaccine plasmid must cross  
88 the phospholipid cellular membrane through endocytosis or pinocytosis, escape degradation in  
89 endosomes and lysosomes, survive cytosolic nucleases, and translocate across the nuclear  
90 envelope. In contrast to physical delivery systems, chemical delivery approaches use  
91 biopharmaceuticals to increase DNA vaccine transfection efficiency.

92 The use of liposomes as a carrier molecule has become a popular DNA vaccine delivery method  
93 as liposomes not only enhance transfection efficiency, but also have an adjuvant effect.  
94 Liposomes are spherical vesicles composed of phospholipids and cholesterol arranged into a  
95 lipid bilayer, allowing for fusion with cellular lipid membranes.<sup>[28]</sup> DNA plasmid can be either  
96 bound to the liposome surface, or encased within the hydrophobic core of the liposome. This  
97 facilitates delivery of the DNA vaccine plasmid into the cells. Importantly, lipid vesicles can be  
98 formulated as either unilamellar or multilamellar. Multilamellar vesicles allow for sustained  
99 delivery of vaccine over an extended period of time. While the use of liposomes for IM injection  
100 has resulted in some reactogenicity issues <sup>[29, 30]</sup>, liposome/DNA vaccine complexes have

101 demonstrated an immunological benefit. IM injection of a liposome/influenza nucleoprotein  
102 formulation increased antibody titers 20-fold compared to vaccine alone.<sup>[31, 32]</sup> Boosting of  
103 antibody titers did not diminish the cytotoxic T cell response. Likewise, inclusion of a liposome  
104 formulation in a *P. falciparum* vaccine enhanced the IFN- $\gamma$  production.<sup>[33, 34]</sup> An ensuing human  
105 trial involving DNA plasmids encoding the influenza H5 HA, nucleoprotein, and M2 genes  
106 reported cellular immune response rates and antibody titers comparable to that of the currently  
107 available inactivated protein-based H5 vaccines.<sup>[35]</sup> Additionally, liposomes have shown promise  
108 as a candidate for delivery of DNA vaccines to mucosal tissue.<sup>[36]</sup> A recent study demonstrated  
109 that vaccination with liposome encapsulated influenza A virus M1 induced both humoral and  
110 cellular immune responses that protected against respiratory infection.<sup>[36]</sup> Liposomes have also  
111 been shown to be an effective delivery method for intranasal DNA vaccination, conferring  
112 protective immune responses against infection.<sup>[37, 38]</sup>

113 DNA vaccine delivery can also be accomplished through the use of biodegradable polymeric  
114 micro- and nanoparticles consisting of amphiphilic molecules between 0.5-10 micrometers in  
115 size. Similar to loading of DNA plasmid on liposomes, plasmid molecules can be either  
116 encapsulated or adsorbed onto the surface of the nanoparticles.<sup>[39-42]</sup> These particles function as a  
117 carrier system, protecting the vaccine plasmid from degradation by extracellular  
118 deoxyribonucleases. In addition to shielding plasmid DNA from nucleases, micro- and  
119 nanoparticles promote the sustained release of vaccine instead of the bolus type of delivery  
120 characteristic of larger submicrometer complexes.<sup>[39, 43]</sup> High molecular weight cationic polymers  
121 have proven significantly more effective than cationic liposomes in aggregating DNA vaccine  
122 plasmid. Plasmid DNA immobilized within biodegradable chitosan-coated polymeric  
123 microspheres (ranging from 20 to 500  $\mu\text{m}$ ) can induce both mucosal and systemic immune

124 responses.<sup>[44]</sup> Microspheres may be delivered either by the oral or intraperitoneal route, allowing  
125 for direct transfection of dendritic cells (DC), thereby increasing DC activation. The benefits of  
126 microsphere formulations have been shown in mice, non-human primates, and humans<sup>[45-49]</sup>  
127 against a wide range of diseases including hepatitis B<sup>[50]</sup>, tuberculosis<sup>[51]</sup>, and cancer.<sup>[52]</sup> These  
128 results suggest that microparticle-based delivery systems are capable of significantly improving  
129 DNA vaccine immunogenicity, and boosting cellular and humoral immune responses.

130 The use of liposomes or nanoparticles appears to be safe and well tolerated in clinical studies.  
131 Microparticle-based delivery systems can increase gene expression, as well as, DNA vaccine  
132 immunogenicity. Although many of the earliest carrier formulations did not show a significant  
133 clinical benefit, more recent studies highlighted herein yielded promising clinical data. As  
134 microparticles can be prepared with significant structural diversity (size, surface charge, lipid  
135 content), they offer considerable flexibility of vaccine formulation. This allows for optimization  
136 of the vaccine based on the specific needs of the clinician.

137 **Molecular Adjuvants**

138 Another approach that has been effective in increasing DNA vaccine immunogenicity is the use  
139 of “vaccine cocktails” containing the DNA vaccine as well as plasmids encoding adjuvanting  
140 immunomodulatory proteins. Plasmid DNA contains unmethylated deoxycytidylate-phosphate-  
141 deoxyguanylate (CpG) motifs that function as a “built in” adjuvant.<sup>[53-59]</sup> Molecular adjuvant  
142 plasmids expressing cytokines, chemokines, or co-stimulatory molecules may be co-  
143 administered with the antigenic DNA vaccine plasmid. Cells transfected by molecular adjuvant  
144 plasmids secrete the adjuvant into the surrounding region, stimulating both local antigen  
145 presenting cells (APC) and cells in the draining lymph node. This results in durable, but low  
146 level, production of immune modulating cytokines that can tailor the immune response towards a

147 more desirable outcome without the concerns of a systemic cytokine storm. While human data is  
148 limited, a wide range of inflammatory and helper T cell cytokines have been studied, in  
149 conjunction with DNA vaccination, in small animal models.<sup>[60, 61]</sup> In particular, we have  
150 highlighted a few of the most prominent molecular adjuvants with demonstrated ability to  
151 increase DNA vaccine immunogenicity.<sup>[62]</sup> A more comprehensive list of molecular adjuvants is  
152 included in **Table 1**.

153 **Plasmid-encoded cytokines**

154 Cytokines are a class of immunoregulatory proteins that affect the behavior of other cells, and  
155 are critical for immune cell signaling. Cytokine-encoding genes can be delivered either as a  
156 separate plasmid, or as additional genes encoded within the antigen containing plasmid. The  
157 most extensively studied molecular adjuvant is Interleukin-2 (IL-2). IL-2 plays an essential role  
158 in the immune response by promoting the differentiation of naïve T cells into effector T cells, as  
159 well as driving the generation of memory T cell pools. It is also required for the proliferation of  
160 Natural Killer (NK) cells. Inclusion of IL-2 has resulted in improved immunogenicity for HIV  
161<sup>[63-65]</sup>, influenza<sup>[66]</sup>, and SARS-CoV<sup>[67]</sup> anti-viral DNA vaccines. Interestingly, a therapeutic  
162 vaccine encoding for the BCR/ABL-pIRES genes of myeloid leukemia and IL-2 also  
163 demonstrated enhanced immune responses, suggesting that IL-2 molecular adjuvants have the  
164 capability of alleviating the symptoms of chronic infection.<sup>[68]</sup>

165 Similar to IL-2, IL-15 is a cytokine that induces NK and T cell proliferation. IL-15 is necessary  
166 for the generation of primary antigen-specific CD4<sup>+</sup> and CD8<sup>+</sup> T cell responses. It also plays a  
167 substantial role in establishment of memory CD8<sup>+</sup> T cell populations.<sup>[69-73]</sup> Results of small  
168 animal studies suggest that the adjuvant effect of IL-15 is most potent when delivered in tandem  
169 with other cytokines. For example, a synergistic effect was seen when IL-15 and IL-21 were co-

170 delivered with a DNA vaccine against *Toxoplasma gondii* infection.<sup>[74, 75]</sup> Additionally,  
171 sequential administration of IL-6, IL-7, and IL-15 genes augmented long-term CD4<sup>+</sup> T cell  
172 memory responses to a foot and mouth disease DNA vaccine.<sup>[76]</sup> Therefore, depending on the  
173 antigen, it may be necessary to deliver IL-15 in combination with other molecular adjuvants.  
174 Notably, a study in rhesus macaques suggests that delivery of an IL-15 encoding DNA vaccine  
175 itself resulted in increased proliferation of NK and T cells, with no adverse effects.<sup>[77]</sup> Another  
176 recent study demonstrated that co-vaccination of rhesus macaques with SIV pol plasmid and  
177 HIV env plasmid plus IL-15 allowed for faster control of viremia than the group not formulated  
178 with IL-15.<sup>[78]</sup> Moreover, macaques vaccinated with IL-15 exhibited increased T cell  
179 proliferation compared to those receiving the antigen plasmid alone, suggesting that IL-15 has a  
180 robust effect on T cell memory responses.

181 IL-12 is another pro-inflammatory cytokine secreted by both dendritic cells and monocytes. IL-  
182 12 plays an integral role in shaping the innate and adaptive immune responses to infection.<sup>[79-83]</sup>  
183 IL-12 signaling supports the secondary expansion of activated T helper 1 (T<sub>h1</sub>) cells<sup>[79, 82, 84-86]</sup>,  
184 resulting in high levels of antigen-specific CD8<sup>+</sup> T cells, and the expression of cytotoxic  
185 mediators such as interferon- $\gamma$  (IFN- $\gamma$ ), granzyme B, and perforin.<sup>[82, 83]</sup> IL-12 was the first  
186 cytokine to be evaluated for use as a molecular adjuvant, and several studies have shown that  
187 inclusion of IL-12 expression plasmids within the vaccine formulation enhances T<sub>h1</sub> immune  
188 responses.<sup>[87-95]</sup> Vaccination of mice with a bicistronic plasmid expressing IL-12 and *Yersinia*  
189 *pestis* resulted in increased mucosal IgA and serum IgG, providing significantly higher levels of  
190 protection against challenge than antigen-only groups.<sup>[96]</sup> Studies in rhesus macaques have  
191 shown similar increases in DNA vaccine immunogenicity. Co-vaccination with SIV gag and IL-  
192 12 allowed for dose sparing<sup>[97]</sup>, as well as increased breadth of T cell responses.<sup>[89, 91, 98, 99]</sup>

193 Additionally, multiple human clinical studies utilizing vaccines adjuvanted with IL-12 have  
194 proven safe<sup>[100]</sup> and highly immunogenic, yielding high level CD4<sup>+</sup> and CD8<sup>+</sup> T cell  
195 responses.<sup>[87, 101, 102]</sup> Furthermore, inclusion of IL-12 expression plasmids can improve weakly  
196 immunogenic vaccines. A recent clinical study demonstrated that addition of IL-12 improved the  
197 immunogenicity of a Hepatitis B DNA vaccine, resulting in increased vaccine immunogenicity,  
198 as well as sustained memory T cell responses.<sup>[103]</sup>

199 The final immunomodulatory cytokine that has received considerable focus as a molecular  
200 adjuvant is granulocyte-macrophage colony stimulating factor (GM-CSF). GM-CSF recruits  
201 antigen presenting cells to the vaccination site and promotes DC maturation.<sup>[104]</sup> It has been  
202 successfully used in multiple DNA vaccines.<sup>[105-107]</sup> Plasmid-encoded GM-CSF, when co-  
203 delivered with a rabies virus DNA vaccine in mice, resulted in increased CD4<sup>+</sup> T cell responses,  
204 antibody production, and protection from lethal viral challenge.<sup>[108]</sup> Likewise, a bicistronic DNA  
205 vaccine encoding HIV-1 gp120 and GM-CSF recruited inflammatory cellular infiltrates and  
206 elicited a potent CD4<sup>+</sup> T cell response.<sup>[109]</sup> However, the benefit of GM-CSF molecular adjuvants  
207 remains unclear. Recent studies have shown that co-administration of GM-CSF plasmid with an  
208 antigen-encoding DNA vaccine can have deleterious effects. Co-delivery of GM-CSF suppressed  
209 the response to a DNA vaccine encoding Dengue virus type 1 and type 2, and also failed to  
210 improve the response elicited by a Hepatitis C vaccine.<sup>[110]</sup> Furthermore, inclusion of plasmid  
211 GM-CSF provided minimal adjuvant effect when co-administered with a malaria DNA vaccine  
212 in rhesus macaques.<sup>[111]</sup> Likewise, GM-CSF had no clear effect on T cell responses in patients  
213 receiving a melanoma DNA vaccine.<sup>[112]</sup> One possible explanation for these results is that high  
214 levels of GM-CSF can expand myeloid suppressor cell populations, and suppress the generation  
215 of adaptive immune responses. Alternatively, the lack of improved immunogenicity seen in

216 clinical trials may be due to the relative lack of GM-CSF receptors on rhesus and human APC  
217 compared to murine cells.<sup>[113]</sup> While no specific adverse effects have been reported, the use of  
218 GM-CSF as an adjuvant may require some fine-tuning, particularly if GM-CSF expression levels  
219 must be considered with regards to immunosuppression.

220 In addition to cytokine-encoding plasmids, several other methods for increasing DNA vaccine  
221 immunogenicity exist. The increased understanding of immune signaling pathways has led to the  
222 development of adjuvant plasmids encoding adhesion molecules, chemokines, costimulatory  
223 molecules, and Toll-like receptor (TLR) ligands. These molecular adjuvants have had some  
224 success in small animal models. For example, the innate immune signaling molecule TRIF  
225 increased the antibody response generated by a swine fever virus DNA vaccine.<sup>[114]</sup> Moreover,  
226 TRIF increased the protective activity of an influenza HA-encoding DNA vaccine.<sup>[115]</sup> Similar  
227 results were seen in studies encoding the dsRNA receptors MDA5 and RIG-I.<sup>[116, 117]</sup>  
228 Additionally, antigen-fusion constructs, whereby the antigen of interest is linked to a “carrier  
229 protein”, can increase the immune visibility of the vaccine, and enhance DNA vaccine  
230 potency.<sup>[118-120]</sup>

231 A major advantage of DNA vaccination is the ability of multiple molecules such as molecular  
232 adjuvants to be inserted into the plasmid. Unlike the addition of recombinant cytokines, co-  
233 stimulatory molecules, and TLR ligands, which have a limited duration due to the short half-life  
234 of recombinant protein *in vivo*, molecular adjuvant-encoding plasmids will express protein for  
235 the same duration as the antigen, stimulating the immune system for a greater length of time.  
236 This can be done without fear of eliciting a cytokine storm, as generation of the adjuvanting  
237 signal will be localized to the site of vaccination. Of note, homologous recombination between  
238 plasmid-encoded cytokines and the host gene sequence does not appear to be a significant

239 concern, as multiple studies have shown that only extrachromosomal plasmid DNA has been  
240 identified following intramuscular injection.<sup>[121, 122]</sup> Furthermore, many current plasmids have  
241 been-codon optimized to improve gene expression in mammalian cells. This has resulted in  
242 changes to the cytokine gene sequence, limiting the possibility for homologous recombination  
243 and/or integration. Molecular adjuvants therefore show great promise for both increasing  
244 immunogenicity and extending the longevity of the immune response.

245 **Improvements in DNA plasmid design**

246 Plasmid DNA vectors contain functional elements, such as the origin of replication and selection  
247 markers, that are only required during the prokaryotic growth process in *E. coli*. These “bacterial  
248 region” elements (**Figure 2**) are no longer needed once cell culture is halted, and may have a  
249 negative effect on vaccine stability, uptake, and efficacy. Additionally, these elements can pose  
250 safety concerns, particularly if widely used antibiotic resistance markers are horizontally  
251 transmitted to host enteric bacteria populations.<sup>[123, 124]</sup>

252 These concerns have been addressed by development of small bacterial RNA-based antibiotic  
253 free selection markers.<sup>[124, 125]</sup> Noncoding RNA markers are preferable to protein markers since  
254 proteins, like antibiotic resistance markers, can be expressed in the host organism after vector  
255 transfection, or horizontally transmitted to host bacteria. Noncoding RNA markers are also very  
256 small (<200 basepairs) which decreases the overall vector size; this is advantageous since vector  
257 transfection efficiency is inversely related to vector size<sup>[126-128]</sup>, perhaps because smaller vectors  
258 are more resistant to delivery associated shear forces<sup>[129]</sup> and may have improved nuclear  
259 localization since they are more motile in the cytoplasm.<sup>[130]</sup> Additionally, some bacterial region  
260 protein marker genes have been shown to dramatically reduce vector expression. For example,  
261 the TN5 derived NPT-II kanamycin resistance marker (kanR) gene in the pVAX1 vector

262 bacterial region significantly reduces transgene expression. Three groups have demonstrated that  
263 pVAX1 bacterial region mediated repression of transgene expression can be alleviated by  
264 replacement of the kanR gene with either a tRNA RNA selection marker, the RNA-OUT  
265 antisense RNA selection marker, or the endogenous pUC origin RNAI antisense RNA selection  
266 marker.<sup>[131-133]</sup> Consistent with this, removal of the pVAX1 bacterial region in a minicircle vector  
267 improved humoral and cellular immune responses up to 3 fold compared to a pVAX1 vector  
268 control.<sup>[134]</sup>

269 DNA vaccine vectors with dramatically higher transgene expression have recently been  
270 developed through identification of novel bacterial region and eukaryotic region vector  
271 configurations. Pioneering work by Mark Kay's laboratory at Stanford University demonstrated  
272 that bacterial regions larger than 1 kilobase silenced transgene expression in quiescent tissue  
273 such as the liver, likely due to untranscribed bacterial region mediated heterochromatin  
274 formation that spreads to the eukaryotic region and inactivates the promoter.<sup>[135-137]</sup> Minicircle  
275 vectors, in which the bacterial region is removed by the action of a phage recombinase during  
276 production, alleviated this silencing.<sup>[135, 136, 138]</sup> However, production of minicircle vectors is low  
277 yield and poorly scalable due to the required *in vivo* or *in vitro* recombination during  
278 manufacture.<sup>[139]</sup> In an effort to create alternative short bacterial region vectors that could be  
279 efficiently manufactured, the Mini-Intronic Plasmid (MIP) and Nanoplasmid<sup>TM</sup> vector plasmid  
280 platforms were developed. MIP vectors incorporate a RNA-OUT selection marker-pUC origin  
281 bacterial region within a 5' UTR intron. In this configuration the bacterial region is within the  
282 transcription unit and the downstream polyA signal is linked to the eukaryotic promoter without  
283 an intervening selection marker or replication origin. Nanoplasmid<sup>TM</sup> vectors are RNA-OUT  
284 selection marker vectors in which the large pUC bacterial replication origin is replaced by a

285 small R6K bacterial replication origin. In this configuration, the <500 basepair (bp) bacterial  
286 region separates the polyA signal and the eukaryotic promoter. Unlike minicircles, both MIP and  
287 Nanoplasmid<sup>TM</sup> RNA-OUT selection vectors can be efficiently manufactured in gram/liter yields  
288 without antibiotic selection.<sup>[140]</sup>

289 As expected, both vector platforms alleviate gene silencing in quiescent tissues similarly to  
290 minicircle vectors.<sup>[141, 142]</sup> However, unexpectedly both MIP and Nanoplasmid<sup>TM</sup> vectors  
291 dramatically improve overall gene expression up to 10 fold compared to plasmid and minicircle  
292 vectors in quiescent (liver) and non-quiescent tissues.<sup>[141, 142]</sup> The improved expression level after  
293 ID and IM delivery has application to improve DNA vaccination since increased expression level  
294 is correlative with improved humoral and cellular immune response.<sup>[62]</sup>

295 Another approach to improve DNA vaccines is to engineer the vector to increase innate immune  
296 activation. DNA vaccines are potent triggers of innate immunity. Various studies have  
297 determined several innate immune pathways are activated by DNA vaccination (**Figure 2**). Most  
298 of the intrinsic adjuvant effect of DNA is mediated by cytoplasmic innate immune receptors that  
299 nonspecifically recognize B DNA and activate Sting or Inflammasome mediated signaling<sup>[53,</sup>  
300 <sup>143]</sup>, but unmethylated CpG sequences specific for TLR9 activation may also be important for  
301 priming CD8 T cell responses.<sup>[144, 145]</sup> Along these lines, DNA vaccine vectors may be sequence  
302 modified to introduce immunostimulatory xxCGxx TLR9 agonists into the vector to increase  
303 innate immune activation. This approach has been used to improve DNA vaccine  
304 immunogenicity<sup>[58, 59, 146]</sup>, but the results are variable. Some of the variability may be due to  
305 unintended inhibition of the eukaryotic promoter expression resulting from integration of CpG  
306 motifs into non-permissive sites in the vector.<sup>[125]</sup> As well, certain DNA delivery methods may  
307 not transfer DNA to the endosome as effectively as other deliveries (*e.g.* liposomes), preventing

308 unmethylated CpG interaction with, and activation of, TLR9. Part of the complexity is that  
309 optimal TLR9 activating xxCGxx motifs are species-specific; different xxCGxx agonist motifs  
310 differentially modulate the immune response<sup>[147]</sup> and many xxCGxx motifs are  
311 immunosuppressive.

312 An alternative strategy is to encode immunostimulatory RNA within the plasmid to increase  
313 innate immune activation. This approach has the potential advantage that additional innate  
314 immune pathways not normally stimulated by DNA alone are activated, resulting in polyvalent  
315 activation of multiple innate immune pathways to enhance immune activation.<sup>[148, 149]</sup> Like TLR9  
316 for DNA, several innate immune TLRs for RNA are endosomal.<sup>[150]</sup> Activation of these receptors  
317 requires motif introduction into an expressed RNA, as well as cytoplasmic RNA shuttling into  
318 the endosome by autophagy. For example, 3'UTR incorporation of a 20 bp immunostimulatory  
319 ssRNA encoding D type CpG upstream of a 28 bp hairpin dsRNA resulted in a 4 fold increase in  
320 antigen reactive IgG titers<sup>[151]</sup>, and a 2 fold increase in IFN- $\gamma$  secreting CD4 $^{+}$  and CD8 $^{+}$  T  
321 cells.<sup>[152]</sup> Moreover, several RNA-sensing innate immune receptors such as RIG-I, MDA5 and  
322 DDX3 are cytoplasmic.<sup>[143]</sup> DNA vaccine expressed RNA can be used to target these receptors  
323 directly, without autophagy. Of these, RIG-I is of particular interest since RIG-I agonists have  
324 demonstrated adjuvant properties to improve the humoral response<sup>[153]</sup>, humoral and CD4 $^{+}$  T  
325 cell response<sup>[154, 155]</sup>, and CD8 $^{+}$  T cell response<sup>[153]</sup> to co-administered antigens.<sup>[156]</sup> In addition,  
326 RIG-I is ubiquitously expressed in most tissues (expression of TLRs typically is restricted to  
327 immune cell subtypes) and certain RIG-I agonists that can be expressed in DNA vaccines (*e.g.* a  
328 blunt dsRNA with a 5' triphosphate) are structurally conserved between humans and mice. A  
329 DNA vaccine vector that co-expresses with antigen a RIG-I dsRNA agonist in a vector backbone

330 encoded RNA Polymerase III transcription unit (**Figure 2**) enhanced the humoral and CD8<sup>+</sup> T  
331 cell response after DNA vaccination.<sup>[117]</sup>

332 DNA vaccines encoding immunostimulatory sequences that selectively improve CTL responses  
333 to encoded antigen may have niche application in vaccines for intracellular pathogens or cancer.  
334 Innovations that increase transgene expression may be used to improve the performance of  
335 immunomodulatory molecular adjuvant plasmids, in addition to traditional antigen expressing  
336 DNA vaccine plasmids. Collectively, vector design innovations that improve transgene  
337 expression level and innate immune activation are complementary to improved mechanical and  
338 non-mechanical DNA vaccine delivery platforms. Combining improved vectors with liposome or  
339 polymeric particle non-mechanical delivery, or with needle free injector device delivery, has the  
340 potential to increase immunogenicity with these well tolerated, safe, delivery platforms.

341 **Conclusion**

342 While DNA vaccination provides several advantages over more conventional vaccination  
343 strategies, further optimization is necessary before it becomes the predominant strategy in human  
344 patients. Despite initial setbacks, significant progress has been made in overcoming the problem  
345 of low immunogenicity in humans. A clearer understanding of the immune mechanisms  
346 governing DNA vaccine immunogenicity has illuminated several pathways that may be useful in  
347 further improving DNA vaccine efficacy. A large catalogue of cytokines, chemokines, adhesion  
348 molecules, and transcription factors are in the process of being tested as molecular adjuvants,  
349 although it is likely that each will need to be carefully assessed for safety and tolerability.  
350 Likewise, continued development of vaccine delivery methods appears promising. New  
351 formulations exploiting sustained vaccine delivery methods, such as slow-releasing micropatches  
352 or multilamellar vesicles, are on the horizon. The strong appeal of needle-free injection and

353 mucosal delivery, the ease of design, and the recent clinical successes with DNA vaccines  
354 suggests that this approach is on the precipice of redefining the field of vaccinology.

355

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365

366

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907

908

909 **Figure 1: Induction of antigen-specific, adaptive immunity by DNA vaccination.** Optimized  
910 gene sequences are inserted into a plasmid backbone and then delivered to the host via one of  
911 several delivery methods. Vaccine plasmid enters the nucleus of host myocytes and antigen  
912 presenting cells by using host cellular machinery. The plasmid components are transcribed and  
913 protein is produced. The cell provides endogenous post-translational modifications to antigens,  
914 producing native protein conformations. Vaccine-derived endogenous peptides are presented on  
915 MHC class I molecules. Engulfment of apoptotic or necrotic cells by APC also allows for cross-  
916 presentation of cell-associated exogenous antigens. Secreted antigen is captured and processed  
917 by antigen presenting cells, and presented on MHC class II. Antigen experienced APC migrate to  
918 the draining lymph node to stimulate CD4<sup>+</sup> and CD8<sup>+</sup> T cell populations. In addition, shed  
919 antigen can be captured by antigen-specific high affinity immunoglobulins on the B cell surface  
920 for presentation to CD4<sup>+</sup> T cells, driving B cell responses.

921

922 **Figure 2: Molecular mechanisms of DNA vaccines.** Transfected double stranded B DNA  
923 (dsDNA) is sensed by cytoplasmic DNA receptors such as interferon-inducible protein 16 (IFI16),  
924 DEAD (Asp-Glu-Ala-Asp) box polypeptide 41 (DDX41) and the cGAMP synthase (cGAS),  
925 each of which can activate the STING►TBK1►IRF3 pathway to induce type 1 interferon  
926 production.<sup>[143]</sup> An additional cytoplasmic innate immune pathway activated nonspecifically by  
927 transfected dsDNA is the cytoplasmic AIM2 inflammasome.<sup>[157]</sup> Other dsDNA receptors and  
928 innate immune activation pathways exist<sup>[143]</sup>, including a recently identified STING/IRF7  
929 signaling pathway required for DNA vaccine immunogenicity.<sup>[158]</sup> By contrast, the endosomal  
930 innate immune receptor TLR9 recognizes specific unmethylated CpG DNA motifs in DNA  
931 vaccines. To improve innate immune activation, addition of optimized immunostimulatory CpG

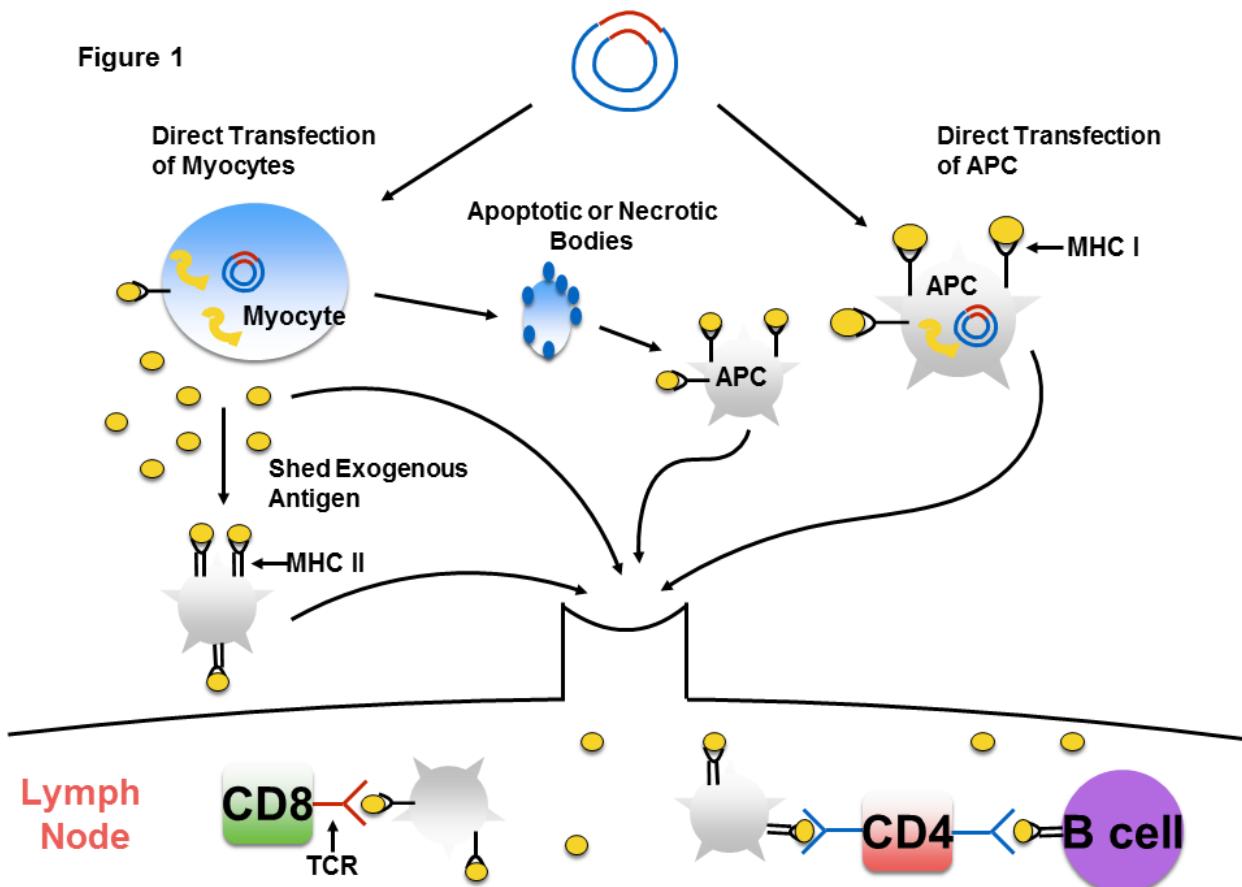
932 motifs in the vector backbone may be used to increase TLR9 activation. Immunostimulatory  
933 RNA expressed from the vector may be utilized to activate alternative RNA sensing innate  
934 immune receptors such as RIG-I using an additional RNA Polymerase III RNA expression  
935 cassette<sup>[117]</sup> (plasmid backbone adjuvant) or incorporation of RNA recognizing TLR agonist  
936 motifs such as CpG RNA into the 3' UTR.<sup>[152]</sup> Due to limited transgene expression after DNA  
937 vaccination in large animals, vector modifications (*e.g.* <500 bp bacterial region Nanoplasmid<sup>TM</sup>  
938 vectors; intronic bacterial region MIP vectors) and deliveries (*e.g.* Electroporation) that improve  
939 transgene expression also improve adaptive immunity.<sup>[62, 125, 159]</sup> Adapted under a Creative  
940 Commons Attribution license from Williams, 2013.<sup>[160]</sup>

941

942

943 **Table 1: Molecular adjuvants tested *in vivo*.**

Molecular Adjuvant	Molecule Type	Animal Model	Adaptive Response Effect	References
CD40L	Co-Stimulatory	Mice	Cellular	[161]
CD80/86	Co-Stimulatory	Mice, NHP	Cellular	[162]
GM-CSF	Cytokine	Mice	Humoral	[163]
ICAM-1	Co-Stimulatory	Mice	Cellular	[164]
IFN- $\gamma$	Cytokine	Mice, NHP	Cellular	[165]
IL-2	Cytokine	Mice	Cellular, Humoral	[165, 166]
IL-4	Cytokine	Mice, NHP	Humoral	[166, 167]
IL-7	Cytokine	Mice	Cellular, Humoral	[168]
IL-8	Chemokine	Mice	Cellular, Humoral	[169, 170]
IL-10	Cytokine	Mice	Cellular	[166]
IL-12	Cytokine	Mice, NHP	Cellular	[98, 171]
IL-15	Cytokine	Mice, NHP	Cytokine	[98, 172]
IL-18	Cytokine	Mice, NHP	Cytokine	[166, 173]
MCP-1	Chemokine	Mice	Humoral	[169]
M-CSF	Cytokine	Mice	Cellular	[163]
MIP-1 $\alpha$	Chemokine	Mice	Humoral	[169]
RANTES	Chemokine	Mice	Cellular	[169, 170]

**Figure 1**

**Figure 2**